PAGE 1 / 10

### FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

									Office Use On	ly
1.	NAME OF COMMITTEE (in fu		PE OR P	RINT ▼		mple: If typion the lines.	ng, type	12FE4M	15	
R	SENATE PAC	<b>)</b>								
Ш										
	DRESS (number and		334 PUN	IPERNICKEL	LANE					
	Check if differ than previousl reported. (ACC	У , ,	MONROE	<u> </u>				NC NC	28110	
2.	FEC IDENTIFICA	TION NUMB	ER ▼		CITY ▲			STATE A	ZIP	CODE A
	C C00570861			3	. IS THIS REPORT		NEW N) <b>OR</b>	AM (A	MENDED )	
4.	TYPE OF REPO	ORT	(b) Monti Repo	ort	Feb 20 (M2)		May 20 (M5)	Aug	20 (M8)	Nov 20 (M11) (Non-Election Year Only)
	(a) Quarterly Repo	orts:	Due	On:	Mar 20 (M3)		Jun 20 (M6)		20 (M9)	Dec 20 (M12) (Non-Election Year Only)
	April 15				Apr 20 (M4)		Jul 20 (M7)	Oct	20 (M10)	Jan 31 (YE)
	Quarterly July 15	Report (Q1)		12-Day  PRE-Election		Primary (12F	P)	General	(12G)	Runoff (12R)
		Report (Q2)		Report for the		Convention (	12C) <b>x</b>	Special	(12S)	
		Report (Q3)				M M /	D D /	Y Y Y Y	in th	
	January 3 Year-End	1 Report (YE)		Ele	ection on	12	12	2017	1	te of AL
	July 31 M Report (N Year Only	on-election		30-Day  POST-Election Report for the		General (300	3)	Runoff (	30R)	Special (30S)
	Terminatio (TER)	n Report			ection on	M = M /	D = D /	Y Y Y Y Y	in th Stat	ne te of
5.	Covering Period	M M M	07	20	17	through	M M M	/ 22	2017	Y
	ertify that I have exa	F		nd to the bes A, SALVATOR		wledge and I	belief it is tru	ie, correct an	d complete.	
Тур	e or Print Name of	Treasurer _								
Sig	nature of Treasurer	PURPURA	A, SALVA	TORE, , ,		[Electronicall <sub>]</sub>	y Filed]	Date 11	/ 26	2017
NO <sup>.</sup>	TE: Submission of fal	lse, erroneous	, or inco	mplete inform	ation may su	bject the per	son signing th	nis Report to t	he penalties of	52 U.S.C. § 30109
	Office Use Only									ORM 3X 05/2016

### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 05/2016) Page 2 Write or Type Committee Name R SENATE PAC 09 07 2017 11 22 2017 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 102986.38 January 1, 2017 (b) Cash on Hand at 98518.43 Beginning of Reporting Period..... 8500.00 77000.00 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 179986.38 107018.43 6(a) and 6(c) for Column B)..... 5909.84 78877.79 7. Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 101108.59 101108.59 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... This committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee N	Name
---------------------------	------

#### R SENATE PAC

port Covering the Period: From: 09	07 2017 To	
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
,		
(i) Itemized (use Schedule A)	5000.00	25000.00
(ii) Unitemized(iii) TOTAL (add	0.00	0.00
Lines 11(a)(i) and (ii)	5000.00	25000.00
	0.00	0.00
(such as PACs)	3500.00	47000.00
11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	8500.00	72000.00
	0.00	0.00
All Loans Received	0.00	0.00
· ·	0.00	0.00
- · · · · · · · · · · · · · · · · · · ·		
· · · · · · · · · · · · · · · · · · ·	0.00	0.00
	4	0.00
	0.00	5000.00
	4 4	4
·	0.00	0.00
	4 4	4 4
(from Schedule H3)	0.00	0.00
b) Levin Funds (from Schedule H5)	0.00	0.00
c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
	Contributions (other than loans) From:  a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	Contributions (other than loans) From: a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	Total This Period		
Operating Expenditures:     (a) Allocated Federal/Non-Federal		Calendar Year-to-Date	
Activity (from Schedule H4)	0.00	0.00	
(i) Federal Share	3.00	0.00	
(ii) Non-Federal Share	0.00	0.00	
(b) Other Federal Operating Expenditures	909.84	43877.79	
(c) Total Operating Expenditures	909.84	43877.79	
(add 21(a)(i), (a)(ii), and (b))▶  Transfers to Affiliated/Other Party	303.04	10011110	
CommitteesContributions to	0.00	0.00	
Federal Candidates/Committees and Other Political Committees	5000.00	35000.00	
Independent Expenditures			
(use Schedule E) Coordinated Party Expenditures (52 U.S.C. § 30116(d))	0.00	0.00	
(use Schedule F)	0.00	0.00	
Loan Repayments Made	0.00	0.00	
Loans MadeRefunds of Contributions To:	0.00	0.00	
(a) Individuals/Persons Other Than Political Committees	0.00	0.00	
4) 5 1111 1 5 1 6 111			
(b) Political Party Committees(c) Other Political Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(d) Total Contribution Refunds	, , , , ,	7 7	
(add Lines 28(a), (b), and (c))	0.00	0.00	
Other Disbursements (Including			
Non-Federal Donations)	0.00	0.00	
Federal Election Activity (52 U.S.C. § 30101	(20))		
(a) Allocated Federal Election Activity			
(from Schedule H6)			
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid	7 7 7	1 1 1 1 1 1 1 1 1	
Entirely With Federal Funds	0.00	0.00	
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00	
Total Disbursements (add Lines 21(c), 22,			
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	5909.84	78877.79	
Total Federal Disbursements			
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	5000.04		
TOTAL EITO OT/	5909.84	78877.79	

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

- ( ,		
III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	8500.00	72000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	8500.00	72000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	909.84	43877.79
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	909.84	43877.79

## SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FC	R	LINE	NU	MBER	:	PAGE	6	OF	10
(ch	ne	ck only	or	ne)					
[3	X	11a		11b		11c	12	!	
		13		14		15	16	;	17

	y information copied from such Reports and Stat for commercial purposes, other than using the na				
$\rangle$	NAME OF COMMITTEE (In Full) R SENATE PAC				
<b>A</b> .	Full Name of Individual (Last, First, Middle Initial SCHWARZMAN, CHRISTINE, , , )  Mailing Address 345 PARK AVE  City NEW YORK  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  N/A  Receipt For:  Primary General Other (specify)	State NY	Zip Co 1015 cupation (for TIRED	de 4 Individual)	Date of Receipt  11
В.	Primary General Other (specify) ▼	State NY C Occ CE Aggregate	Zip Co 10152 cupation (for GO e Year-to-Date	de  Individual)  e ▼  2500.00	Date of Receipt  11 15 2017  Transaction ID: SA11AI.4348  Amount of Each Receipt this Period  2500.00  Memo Item  CONTRIBUTION
C.	Full Name of Individual (Last, First, Middle Initial  Mailing Address  City  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  Receipt For:  Primary General Other (specify)	State Occ	Zip Co  cupation (for	de Individual)	Date of Receipt  M M / D D / Y Y Y Y Y  Amount of Each Receipt this Period  Memo Item
S	UBTOTAL of Receipts This Page (optional)			<b>&gt;</b>	5000.00
т	OTAL This Period (last page this line number on	ly)		·····	5000.00

#### S 17

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 OF 10 (check only one)  11a 11b
Any information copied from such Reports and or for commercial purposes, other than using			person for the purpose of soliciting contributions be to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) R SENATE PAC			
Full Name of Individual (Last, First, Middle  A. GRANT THORNTON PAC	Initial) or Full C	Organization Name	Date of Receipt
Mailing Address 171 N CLARK ST			10 03 2017
City CHICAGO	State IL	Zip Code 60601	Transaction ID : SA11C.4341  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C co	0408260	3500.00
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item CONTRIBUTION
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 3500.00	
Full Name of Individual (Last, First, Middle B.	Initial) or Full C	Organization Name	Date of Receipt
Mailing Address			M = M / D = D / Y = Y = Y
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		
Name of Employer (for Individual)	Occ	cupation (for Individual)	Memo Item
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼	
Full Name of Individual (Last, First, Middle C.	Initial) or Full C	Organization Name	Date of Receipt
Mailing Address			M = M / D = D / Y = Y = Y
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item
Receipt For:  Primary General Other (specify)	Aggregate	Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional).			3500.00

TOTAL This Period (last page this line number only).....

3500.00

#### S 17

SCHEDULE B (FEC Form 3X)			FOR L	NE NUMBI	NUMBER: PAGE 8 OF				F 10
ITEMIZED DISBURSEMENTS		category of the	l `	only one)		٦			
		Summary Page		21b 22 28a 28	<u>,</u>	23 28c	26	27 30b	
Any information conicd from such Departs and State	manta may	not be cold or use							
Any information copied from such Reports and State or for commercial purposes, other than using the na									
NAME OF COMMITTEE (In Full)									
R SENATE PAC									
Full Name (Last, First, Middle Initial)				5.	( 5				
A. CHAIN BRIDGE BANK				Date	of D	isburse		/	Υ
Mailing Address 1445-A LAUGHLIN AVE				C	9	1	5	2017	_
City MCLEAN	State VA	Zip Code 22101		FEC	Ident	ificatior	Number		
Purpose of Disbursement	VA	22101		C		-			
BANK FEE			L				ID ODO	1D 1007	
Candidate Name			Category				ID: SB2 <sup>r</sup> Disburser	1 <b>B.4337</b> ment this P	eriod
			Type		-	1 1			-
	ment For:					<del></del>	-	25.16	)
Senate President	Primary Other (spe	General							
State: District:	Other (spe	ony) \			Memo	Item			
Full Name (Last, First, Middle Initial)									
B. CHAIN BRIDGE BANK				Date	of D	isburse	ment		
				М	M - M / D - D / Y - Y - Y - Y			Υ	
Mailing Address 1445-A LAUGHLIN AVE					0	1	3	2017	
City MCLEAN	State VA	Zip Code 22101		FEC	Ident	ificatior	n Number		
Purpose of Disbursement						C			
BANK FEE		France	action	ID : SB21	IB 4242				
Candidate Name			Category	_				ment this P	eriod
Office Country   House			Туре					25.46	2
Office Sought: House Disburse Senate	ment For: Primary	General			_	7	-	25.40	<u>,                                     </u>
President	Other (spe								
State: District:					Memo	Item			
Full Name (Last, First, Middle Initial)									
C. CHAIN BRIDGE BANK				Date	of D	isburse			
Mailing Address 1445-A LAUGHLIN AVE				M		1:		2017	Y
City	04-4-	Zin Codo							
City MCLEAN	State VA	Zip Code 22101		FEC	Ident	ificatior	Number		
Purpose of Disbursement									
BANK FEE			l		Trans	action	ID : SB2	1B.4346	
Candidate Name	/ Amo	unt of	Each	Disburse	ment this P	eriod			
Office Sought: House Disburse	Office Sought: House Disbursement For:							26.12	
Senate	Primary	General			-	7		20.12	
President	Other (spe					la			
State: District:					Memo	nem_			
					_	-			$\overline{}$
SUBTOTAL of Disbursements This Page (optional).				· L		7		76.7	4
TOTAL This Period (last page this line number only	1					-			

#### S П

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.  ANAME OF COMMITTEE (In Full) R SENATE PAC  Full Name (Last, First, Middle Initial)  A. PURPURA, SALVATORE, , ,  Mailing Address 6334 PUMPERNICKEL LN  City MONROE Purpose of Disbursement COMPLIANCE CONSULTING Candidate Name  Office Sought:  Full Name (Last, First, Middle Initial)  B. PURPURA, SALVATORE, , ,  Mailing Address 6334 PUMPERNICKEL LN  City MONROE Purpose of Disbursement Compliance Consolution State:  District:  Full Name (Last, First, Middle Initial)  B. PURPURA, SALVATORE, , ,  Mailing Address 6334 PUMPERNICKEL LN  City MONROE Purpose of Disbursement Compliance Consoluting Candidate Name  City Monroe Purpose of Disbursement Compliance Consoluting Candidate Name  City Monroe Purpose of Disbursement Compliance Consoluting Candidate Name  City Monroe Purpose of Disbursement Compliance Consoluting Candidate Name  City Monroe Purpose of Disbursement Compliance Consoluting Candidate Name  City Monroe Purpose of Disbursement Compliance Consoluting Candidate Name  Category/ Type  Date of Disbursement  Category/ Type  FEC Identification Number  Category/ Type  Transaction ID : \$8218.4345  Amount of Each Disbursement this Period  Transaction ID : \$8218.4345  Amount of Each Disbursement this Period  Transaction ID : \$8218.4345  Amount of Each Disbursement this Period  Type  Office Sought:  Full Name (Last, First, Middle Initial)  Memo Item  Full Name (Last, First, Middle Initial)	SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER:	PAGE 9 OF 10
Detailed Summary Page   288   280   280   29   300   30   300   30   300   30   300	ITEMIZED DISBURSEMENTS			1 ` ′	· ′	
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for committee.  NAME OF COMMITTEE (In Full NAME)  R SENATE PAC  Full Name (Last, First, Middle Initial)  A. PURPURA, SALVATORE, ,  Mailing Address 6334 PUMPERNICKEL LN  City MONROE Purpose of Disbursement COMPLIANCE CONSULTING Candidate Name  City Monroe President State District City Monroe President Compliance State Primary Compliance Compliance Compliance Compliance Compliance State Primary State Primary Compose of Disbursement COMPLIANCE CONSULTING Category Type  City MONROE Purpose of Disbursement COMPLIANCE CONSULTING Category Monroe President Compliance Complia						
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.  NAME OF COMMITTEE (in Full)  R SENATE PAC  Full Name (Last, First, Middle Initial)  City MoNROE  Purpose of Disbursement ComPulANCE CONSULTING Candidate Name  Disbursement For:  State  District  Full Name (Last, First, Middle Initial)  B. PURPURA, SALVATORE, ,  Mailing Address 6334 PUMPERNICKEL LN  City MoNROE  Full Name (Last, First, Middle Initial)  B. PURPURA, SALVATORE, ,  Mailing Address 6334 PUMPERNICKEL LN  City MoNROE  NC  State  Disbursement For:  City MoNROE  NC  State  Disbursement For:  ComPulANCE CONSULTING  Candidate Name  City MoNROE  NC  State  Disbursement For:  ComPulANCE CONSULTING  Candidate Name  City State  Disbursement For:  ComPulANCE CONSULTING  Candidate Name  City State  Disbursement For:  ComPulANCE CONSULTING  Category/ Type  Transaction ID: S8218.4345  Anount of Each Disbursement this Penicd  Transaction ID: S8218.4345  Anount of Each Disbursement this Penicd  ComPulANCE CONSULTING  Category/ Type  Transaction ID: S8218.4345  Anount of Each Disbursement this Penicd  Transaction ID: S8218.4347  Anount of Each Disbursement this Penicd  CREDIT CAR MERCHANT FEE  Candidate Name  Office Sought  FEC Identification Number  Cransaction ID: S8218.4347  Anount of Each Disbursement this Penicd  Transaction ID: S8218.4347  Anount of Each Disbursement this Penicd  Transaction ID: S8218.4347  Anount of Each Disbursement this Penicd  Transaction ID: S8218.4347  Anount of Each Disbursement this Penicd  Transaction ID: S8218.4347  Anount of Each Disbursement this Penicd  Transaction ID: S8218.4347  Anount of Each Disbursement this Penicd  Transaction ID: S8218.4347  Anount of Each Disbursement this Penicd  Transaction ID: S8218.4347  Anount of Each Disbursement this Penicd  Transaction ID: S8218.4347  Anount of Each Disbursement this Penicd  Transaction ID: S8218.4347  Anount of Each Disbursement this Penicd  Transaction ID: S8218.4347  Anount of Each Disbursem	Any information copied from such Benorts and Sta	atements may	not be sold or us			
R SENATE PAC  Full Name (Last, First, Middle Initial) A. PURPURA, SALVATORE, , ,   Mailing Address 6334 PUMPERNICKEL LN  City State						
Full Name (Last, First, Middle Initial)  A PURPURA, SALVATORE, , ,   Mailing Address 6334 PUMPERNICKEL LN  City MonRoe NC 28110  Candidate Name  Candidate Name  Compliance Consoluting  City Sanata President State: District:  Full Name (Last, First, Middle Initial)  B. PURPURA, SALVATORE, , ,   Mailing Address 6334 PUMPERNICKEL LN  City State: District:  Full Name (Last, First, Middle Initial)  Compliance Consoluting  Candidate Name  Compliance Consoluting  Candidate Name  Compliance Consoluting  Candidate Name  Compliance Consoluting  Candidate Name  Compliance Consoluting  Condidate Name  Compliance Consoluting  Condidate Name  Compliance Consoluting  Compliance Consoluting  Condidate Name  Compliance Consoluting  Compliance Consoluting  Condidate Name  Condidate Name  Compliance Consoluting  Condidate Name  Condidate Name  Condidate Name  Compliance Consoluting  Condidate Name  Compliance Consoluting  Condidate Name						
A. PURPURA, SALVATORE, , ,   Mailing Address 6334 PUMPERNICKEL IN  City	$  \rangle$ R SENATE PAC					
A. PURPURA, SALVATORE, , , Mailing Address 6334 PUMPERNICKEL LN  City	Full Name (Last First Middle Initial)				Ī	
Mailing Address 6334 PUMPERNICKEL LN  City MONROE  Purpose of Disbursement COMPLIANCE CONSULTING  Cardidate Name  Office Sought:					Date of Disbu	ırsement
City MONROE Purpose of Disbursement COMPLIANCE CONSULTING Candidate Name  Office Sought:					M = M /	D D / Y Y Y Y Y
MONROE	Mailing Address 6334 PUMPERNICKEL LN				10	01 2017
MONROE	Citv	State	Zip Code		FFO Identifica	. Para Manada an
Category/ Office Sought:	•	<b>I</b>	1 '		FEC Identifica	ation Number
Candidate Name  Category/ Type  Office Sought:		•				
Office Sought:						
Office Sought:	Candidato Namo				Amount of Ea	ch Disbursement this Period
State: District: Other (specify) ▼    Memo Item	Office Sought: House Disbur	sement For:		71		375.00
State: District:  Full Name (Last, First, Middle Initial)  B. PURPURA, SALVATORE, , ,  Mailing Address 6334 PUMPERNICKEL LN  City						, , , , , , , , , , , , , , , , , , , ,
Full Name (Last, First, Middle Initial)  B. PURPURA, SALVATORE, , ,  Mailing Address 6334 PUMPERNICKEL LN  City  MONROE  Purpose of Disbursement  COMPULANCE CONSULTING  Candidate Name  Office Sought:  House  President  State:  Disbursement For:  Senate  President  Other (specify)  Memo Item  FEC Identification Number  Category/ Type  Transaction ID: SB218.4345  Amount of Each Disbursement this Period  Memo Item  FEC Identification Number  Category/ Type  Transaction ID: SB218.4345  Amount of Each Disbursement this Period  Transaction ID: SB218.4345  Amount of Each Disbursement this Period  Transaction ID: SB218.4345  Amount of Each Disbursement this Period  Transaction ID: SB218.4347  Amount of Each Disbursement  Category/ Type  Transaction ID: SB218.4347  Amount of Each Disbursement this Period  Transaction ID: SB218.4347  Amount of Each Disbursement this Period  Transaction ID: SB218.4347  Amount of Each Disbursement this Period  Transaction ID: SB218.4347  Amount of Each Disbursement this Period  Office Sought:  House  Primary  General  Other (specify)  Memo Item  SUBTOTAL of Disbursements This Page (optional)		Other (spe	ecify) 🔻		Memo Ite	m
B. PURPURA, SALVATORE, , ,  Mailing Address 6334 PUMPERNICKEL LN  City						
Mailing Address 6334 PUMPERNICKEL LN  City Montose Mailing Address 6334 PUMPERNICKEL LN  State NC State State NC State	• • • • • • • • • • • • • • • • • • • •				Date of Disbu	ırsement
City MONROE Purpose of Disbursement COMPLIANCE CONSULTING Candidate Name  Office Sought: President State: District:  Full Name (Last, First, Middle Initial) C. STRIPE  Mailling Address 3180 18TH ST  City SAN FRANCISCO Purpose of Disbursement CREDIT CARD MERCHANT FEE Candidate Name  Office Sought: District:  Date of Disbursement CREDIT CARD MERCHANT FEE Candidate Name  Disbursement For: Category/ Type  Office Sought: District:  Memo Item  FEC Identification Number  Category/ Type  FEC Identification Number  Category/ Type  FEC Identification Number  Category/ Transaction ID: SB21B.4347  Amount of Each Disbursement this Period  Transaction ID: SB21B.4347  Amount of Each Disbursement this Period  Memo Item  SUBTOTAL of Disbursements This Page (optional)					M = M /	
MONROE Purpose of Disbursement COMPLIANCE CONSULTING Candidate Name  Category/ Type  Office Sought: House Primary General President State: District:  Full Name (Last, First, Middle Initial)  C. STRIPE  Mailing Address 3180 18TH ST  City SAN FRANCISCO Purpose of Disbursement CREDIT CARD MERCHANT FEE  Candidate Name  Office Sought: House Disbursement For: Senate Primary General Office Sought: House Disbursement For: Substitution Number  Each Disbursement This Period  Memo Item  SUBTOTAL of Disbursements This Page (optional)	Mailing Address 6334 PUMPERNICKEL LN				10 31 2017	
MONROE Purpose of Disbursement COMPLIANCE CONSULTING Candidate Name  Category/ Type  Office Sought: House Senate President State: District:  Full Name (Last, First, Middle Initial)  C. STRIPE  Mailing Address 3180 18TH ST  City SAN FRANCISCO Purpose of Disbursement CREDIT CARD MERCHANT FEE  Candidate Name  Office Sought: House Senate Primary General Other (specify)  Category/ Type  Date of Disbursement  Category/ Type  FEC Identification Number  Category/ Type  Office Sought: House Primary General Other (specify) ▼  State: District:  Substate: District: Memo Item  FEC Identification Number  Category/ Type  Memo Item  Substate: District: Memo Item	City	State	Zip Code		FEC Identifica	ation Number
Compliance Consulting Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify)  State: District:  Full Name (Last, First, Middle Initial)  C. STRIPE  Mailing Address 3180 18TH ST  City SAN FRANCISCO CA 94110  Purpose of Disbursement CREDIT CARD MERCHANT FEE  Candidate Name  Office Sought: House Senate Primary General Other (specify)  Transaction ID : SB21B.4345  Amount of Each Disbursement  FEC Identification Number  Category/ Type  Transaction ID : SB21B.4347  Amount of Each Disbursement this Period  Memo Item  Substitute Primary General Other (specify) ▼  Substitute District:  Substitute District:  Substitute District: Substitute District: Sa3.10		NC	28110			tion rumber
Category/ Type  Office Sought: House Senate Primary General Other (specify)  State: District:  Full Name (Last, First, Middle Initial)  C. STRIPE  Mailing Address 3180 18TH ST  City State Zip Code SAN FRANCISCO CA 94110  Purpose of Disbursement CREDIT CARD MERCHANT FEE  Candidate Name  Category/ 11 15 2017  FEC Identification Number  Category/ Type  Office Sought: House Disbursement For: 145.60  Senate Primary General Other (specify) Memo Item  State: District: Memo Item  833.10						
Office Sought: House Senate Primary General State: District:  Full Name (Last, First, Middle Initial)  C. STRIPE  Mailing Address 3180 18TH ST  City State Zip Code SAN FRANCISCO CA 94110  Purpose of Disbursement CREDIT CARD MERCHANT FEE Candidate Name  Candidate Name  Office Sought: House Disbursement For: 145.60  Senate Primary General Other (specify) Memo Item  State: District: Memo Item  State: Senate Primary General Other (specify) Memo Item  Substitution Number  Category/ Type  Memo Item  833.10	Candidate Name			Category/		
Senate Primary General Other (specify)  State: District:  Full Name (Last, First, Middle Initial)  C. STRIPE  Mailing Address 3180 18TH ST  City SAN FRANCISCO Purpose of Disbursement CREDIT CARD MERCHANT FEE  Candidate Name  Office Sought: House Primary General Other (specify)  Senate Primary General Other (specify)  Memo Item  Date of Disbursement  FEC Identification Number  Category/ Type  145.60  Senate Primary General Other (specify)  Memo Item  833.10					Amount of La	ion dispuisement this renou
State: District:  Full Name (Last, First, Middle Initial)  C. STRIPE  Mailing Address 3180 18TH ST  City SAN FRANCISCO Purpose of Disbursement CREDIT CARD MERCHANT FEE  Candidate Name  Office Sought: House Primary General President Other (specify)  State: District:  Memo Item  Date of Disbursement  FEC Identification Number  Category/ Type  Office Sought: House Senate Primary General Other (specify) ▼  SUBTOTAL of Disbursements This Page (optional)						312.50
State: District:  Full Name (Last, First, Middle Initial)  C. STRIPE  Mailing Address 3180 18TH ST  City SAN FRANCISCO Purpose of Disbursement CREDIT CARD MERCHANT FEE  Candidate Name  Office Sought: House Primary General Office Sought: President State: District:  Substortal of Disbursements This Page (optional)					_	
C. STRIPE  Mailing Address 3180 18TH ST  City SAN FRANCISCO Purpose of Disbursement CREDIT CARD MERCHANT FEE  Candidate Name  Category/ Type  Office Sought: House Senate Primary General President State: District:  Subtotal of Disbursement  Other (specify) ▼  Subtotal of Disbursement  M M M / 15 / 2017  FEC Identification Number  Category/ Type  Transaction ID: SB21B.4347  Amount of Each Disbursement this Period  Memo Item  833.10		Other (spe	city)		Memo Ite	m
Mailing Address 3180 18TH ST  City SAN FRANCISCO Purpose of Disbursement CREDIT CARD MERCHANT FEE  Candidate Name  Category/ Type  Office Sought: House Senate Primary General President State: District:  SUBTOTAL of Disbursements This Page (optional)	Full Name (Last, First, Middle Initial)					
City SAN FRANCISCO Purpose of Disbursement CREDIT CARD MERCHANT FEE  Candidate Name  Office Sought: House Primary President State: District:  Subtrotal of Disbursements This Page (optional)	C. STRIPE				Date of Disbu	irsement
City SAN FRANCISCO Purpose of Disbursement CREDIT CARD MERCHANT FEE  Candidate Name  Category/ Type  Office Sought: House Senate Primary General President Other (specify) ▼  State: District:  Substitute Zip Code 94110  FEC Identification Number  Category/ Transaction ID : SB21B.4347  Amount of Each Disbursement this Period  Memo Item  833.10	Mailing Address 2499 49TH ST				1	
SAN FRANCISCO Purpose of Disbursement CREDIT CARD MERCHANT FEE  Candidate Name  Category/ Type  Office Sought: House Senate Primary General President State: District:  Substitute Of Disbursements This Page (optional)	Mailing Address Stou Total St				ا لندا ا	10 2017
Purpose of Disbursement CREDIT CARD MERCHANT FEE  Candidate Name  Category/ Type  Office Sought: House Disbursement For: Senate Primary General President Other (specify) ▼  State: District:  Substitute: Disbursements This Page (optional)					FEC Identifica	ation Number
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Candidate Name    Category/ Type				ID. ODO4D 4047		
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TOTAL This Period (last page this line number only)	SUBTOTAL of Disbursements This Page (optional	ıl)		·····•		833.10
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SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 10 OF			
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only one)			
	Detailed Summary Page	21b 22 <b>x</b> 23 26 27 28a 28b 28c 29 30b			
Any information copied from such Benorts and Statem	nents may not be sold or used	by any person for the purpose of soliciting contributions			
		I committee to solicit contributions from such committee.			
NAME OF COMMITTEE (In Full)					
R SENATE PAC					
Full Name (Last, First, Middle Initial)		_ , , _ ,			
A. JUDGE ROY MOORE FOR US SE	Date of Disbursement				
Mailing Address PO BOX 5032		09 27 2017			
City S MONTGOMERY	State Zip Code AL 36103	FEC Identification Number			
Purpose of Disbursement COMMITTEE CONTRIBUTION	ı	C C00639401			
Candidate Name		Transaction ID : SB23.4338  Category/ Amount of Each Disbursement this Perio			
MOORE, ROY JUDGE, , ,		Category/ Type  Amount of Each Disbursement this Period 5000.00			
Office Sought: House Disbursen	Office Sought: House Disbursement For: 2017				
President <b>x</b>	Other (specify) ▼	Memo Item			
State: AL District: 00	Special-General				
Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement			
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Purpose of Disbursement	1	C			
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	Category/ Type  Amount of Each Disbursement this Perior				
Office Sought: House Disbursen					
	Primary General	_			
State: District:	Other (specify)	Memo Item			
Full Name (Last, First, Middle Initial)		5			
C.		Date of Disbursement			
Mailing Address	Mailing Address				
City	State Zip Code	FEC Identification Number			
Purpose of Disbursement	Purpose of Disbursement				
·	. a.pass s. a.a.a.a.				
Candidate Name	Category/ Type  Amount of Each Disbursement this Perio				
Office Sought: House Disbursen	nent For:	71.			
Senate	7 7 7				
	Other (specify) ▼	Memo Item			
State: District:					
SUBTOTAL of Disbursements This Page (optional)		5000.00			
TOTAL This Period (last page this line number only)					